BUREAU OF LAND MANAGEMENT-ALASKA EMPLOYEE PERSONAL PROPERTY CLAIM ADMINISTRATIVE DETERMINATION				
		CLAIM NUMBER: Financial Services assigns		
		DATE:	Financial Servic	Financial Services completes
Name of Claimant: Date of Loss:	Riley B. King Total Amount Claimed:	Address of Claimant: Riley B. King P.O. Box 54236 Koyukuk, AK 99754 (After 9/15/2003)		
July 20, 2003	\$ 463.00			
Supervisory Statement: (Include statement of circumstances of employee loss and cost code for reimbursement, if approved.)				
7/20/03. At approximand overrun the camps to the situation by a spare pair of prescribis personal gear backampsite, including to	ng on the initial attack lately 1325, the wind shifte. All the firefighted insuring the safety of perpendicular personal	ers on the increase on the increase on the increase of the fire and governments on all properties.	ng the fire to chancident responded ing's personal gear in a protective to all personal gear property such ty loss is:	ange direction appropriately ar included a metal case in ar at the
Supervisor's Signature: Kenneth G. Coe, Galena Zone F.M.O. Date: 8/10/03				Date:
Division Chief/Field Office	Manager Signature: Ed Strong	, Chief, Division	of Fire Operations	Date: 8/10/03
Reviewing Authority Determ After review and with due or reached:	nination: onsideration of all information su	ubmitted with thi	is claim, the following f	indings have been
Financial Services completes				
Claim is therefore:	Denied Accepted	Award Amour	nt:	
Authorizing Official (AFS M	/Igr./DSD Admin.) Author	orizing Official (signature)	

If claimant is dissatisfied with this determination, he/she may request reconsideration by filing the appropriate documentation through the Office of the Regional Solicitor, Alaska Region, 4230 University Drive, Suite 300, Anchorage, Alaska 99508-4626.